



\$325.00 FEE

STATE OF TENNESSEE
DEPARTMENT OF FINANCIAL INSTITUTIONS
COMPLIANCE DIVISION

ANNUAL INSPECTION FEE AND REGISTRATION FEE FOR INDUSTRIAL LOAN AND THRIFT
COMPANY APPLICANTS

To the Commissioner of Financial Institutions:

Name, address and daytime telephone number of contact person

I, _____
Name & Title of Officer

Name & Address of Home Office

hereby certify upon oath that the said corporation, partnership, or individual, in payment of the Annual Inspection Fee and Registration Fee will lawfully and fairly operate as an industrial loan and thrift company in Tennessee at the following locations:

Name of Company or Branch

Address

Zip Code

Federal Tax Identification # _____

Identify all parties owning over 5% interest in the applicant. (If a partnership, list each partner and their interest.)

Has any stockholder, officer or employee ever been convicted of a felony?

Yes _____ No _____ If yes, explain fully on a separate sheet.

No. Employees _____ No. Accounts _____ Accounts Rec. \$ _____

I certify that the tangible net worth of each office or place of business does now and will continue to exceed the \$25,000.00 minimum requirement of T.C.A. Section 45-5-201.

ATTACH CURRENT ANNUAL FINANCIAL STATEMENT (BALANCE SHEET AND STATEMENT OF INCOME AND EXPENSE AT A MINIMUM)

The sum of \$325.00 for the above named company in payment of fees required by T.C.A. Section 45-5-203 as amended, for the fiscal year July 1, _____ through June 30, _____ is hereby tendered.

Subscribed and sworn to before me

Witness my signature on this _____ day

on this _____ day of _____, _____.

of _____, _____.

My commission Expires; _____

Signature of Officer, Partner or Proprietor

Notary Public

MAKE CHECK PAYABLE TO THE DEPARTMENT OF FINANCIAL INSTITUTIONS

MAIL TO:

COMPLIANCE DIVISION
SUITE 400, NASHVILLE CITY CENTER
511 UNION STREET
NASHVILLE, TN 37219